

# FEE TRANSMITTAL FY 2007

*Complete if Known*

|                        |                   |
|------------------------|-------------------|
| Application Serial No. | 10/766,312        |
| Filing Date            | January 29, 2004  |
| First Named Inventor   | David M. SCHUSTER |
| Group No.              | 1637              |
| Examiner Name          | David C. Thomas   |
| Confirmation No.       | 1253              |

## METHOD OF PAYMENT

☒ Payment Enclosed:  
☐ Check ☐ Money Order ☒ Other

☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840

☒ Required Fees (copy of this sheet enclsd).

☒ Additional fee required under 37 CFR 1.16 and 1.17.

☒ Overpayment Credit.

☒ Applicant claims small entity status.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | Filing | Search | Examination | Fee Paid |
|------------------|--------|--------|-------------|----------|
| Utility          | 300    | 500    | 200         |          |
| Design           | 200    | 100    | 130         |          |
| Plant            | 200    | 300    | 160         |          |
| Reissue          | 300    | 500    | 600         |          |
| Provisional      | 200    | 0      | 0           |          |

### Small Entity Discount

### 1. TOTAL

### 2. EXCESS CLAIM FEES

|  | Fee                 | Small Entity Fee (\$) |
|--|---------------------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent             | 50                  | 25                    |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent. | 200                 | 100                   |
| <b>Total Claims</b>  | <b>Extra Claims</b> | <b>Fee Paid (\$)</b>  |

15 - 20 or HP= \_\_\_\_\_ x \$ \_\_\_\_ =  
 HP = highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee Paid (\$)

3 - 3 or HP= \_\_\_\_\_ x \$ \_\_\_\_ =  
 HP = highest number of total claims paid for, if greater than 3

|                           |         |                       |               |
|---------------------------|---------|-----------------------|---------------|
| Multiple Dependent Claims | Fee(\$) | Small Entity fee (\$) | Fee Paid (\$) |
|                           | 360     | 180                   |               |

### 2. TOTAL:

### 3. APPLICATION SIZE FEE

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Additional 50 or fraction thereof | Fee (\$)                   | Fee Paid |
|--------------|--------------|-----------------------------------|----------------------------|----------|
| -100=        | 0            | /50=                              | round up to a whole number | x = 0.00 |

### 3. TOTAL:

## CORRESPONDENCE ADDRESS

Direct all correspondence to:  
 PATENT ADMINISTRATOR  
 Proskauer Rose LLP  
 1001 Pennsylvania Avenue, N.W., Suite 400  
 Washington, D.C. 20004  
 Tel. No.: (202) 416-6800  
 Fax No.: (202) 416-6899  
 CUSTOMER NO: 61263

## FEE CALCULATION (continued)

### 4. ADDITIONAL FEES

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description  | Fee Paid |
|-----------------------|-----------------------|--|----------|
| 130                   | 65                    | Surcharge - late filing fee or oath                            |          |
| 50                    | 25                    | Surcharge - late provisional filing fee or cover sheet         |          |
| 130                   | 130                   | Non-English specification                                      |          |
| 2,520                 | 2,520                 | Request for ex parte re-examination                            |          |
| 120                   | 60                    | Extension for reply within 1 <sup>st</sup> mo.                 |          |
| 450                   | 225                   | Extension for reply within 2 <sup>nd</sup> mo.                 |          |
| 1,020                 | 510                   | Extension for reply within 3 <sup>rd</sup> mo.                 | \$510.00 |
| 1,590                 | 795                   | Extension for reply within 4 <sup>th</sup> mo.                 |          |
| 2,160                 | 1,080                 | Extension for reply within 5 <sup>th</sup> mo.                 |          |
| 500                   | 250                   | Notice of Appeal   |          |
| 500                   | 250                   | Filing a brief in support of an appeal                         |          |
| 1,000                 | 500                   | Request for oral hearing                                       |          |
| 400                   | 0                     | Petitions to the Director                                      |          |
| 180                   | 180                   | Submission of IDS  |          |
| 790                   | 395                   | Filing a submission after final rejection (37 CFR 1.129(a))    |          |
| 790                   | 395                   | For each additional invention to be examined (37 CFR 1.129(b)) |          |
| 100                   | 100                   | Certificate of Correction for applicant's error                |          |
| 130                   | 65                    | Submission of Terminal Disclaimer                              |          |

Other fee (Specify) \_\_\_\_\_

Other fee (Specify) \_\_\_\_\_

### 4. TOTAL:

## TOTAL AMOUNT SUBMITTED

(\$510.00)

## SIGNATURE BLOCK

Respectfully submitted,

 53,547 fee

Paul M. Booth

Attorney for the Applicant(s)

Proskauer Rose LLP

1001 Pennsylvania Ave., N.W., #400  
 Washington, D.C. 20004

Date: February 28, 2007

Reg. No.: 40,244

Tel. No.: (202) 416-6800

Fax No.: (202) 416-6899